## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| Application or Docket Number |
|------------------------------|
|------------------------------|

HRLO98

| CLAIMS AS FILED - PART I<br>(Column 1)                                               |                                                        |                                                                                        |                                         |                      |                               | mn 2)                                |         | SMALL ENTITY TYPE   |                        | OR            | OTHER THAN OR SMALL ENTITY      |                        |  |
|--------------------------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------|----------------------|-------------------------------|--------------------------------------|---------|---------------------|------------------------|---------------|---------------------------------|------------------------|--|
| TOTAL CLAIMS                                                                         |                                                        |                                                                                        | US                                      |                      |                               |                                      | Γ       | RATE                | FEE                    | ſ             | RATE                            | FEE                    |  |
| FOR                                                                                  |                                                        |                                                                                        | NUMBER FILED                            |                      | NUMBER EXTRA                  |                                      |         | BASIC FEE           | 355.00                 | OR            | BASIC FEE                       | 710.00                 |  |
| то                                                                                   | TAL CHARGEA                                            | 45 min                                                                                 | √∫ minus 20=                            |                      | · 25                          |                                      | X\$ 9=  |                     | OR                     | X\$18=        | 40                              |                        |  |
| IND                                                                                  | EPENDENT CL                                            | AIMS                                                                                   | √ minus 3 =                             |                      | * /                           |                                      | Ī       | X40=                |                        | OR            | X80=                            | 80                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                     |                                                        |                                                                                        |                                         |                      |                               |                                      | Ì       | +135=               |                        | OR            | +270=                           |                        |  |
| * If the difference in column 1 is less than zero, enter                             |                                                        |                                                                                        |                                         |                      |                               | olumn 2                              | L       | TOTAL               |                        | OR            | TOTAL                           | 1240                   |  |
|                                                                                      | C                                                      | LAIMS AS A                                                                             | MENDED                                  | - PART II            |                               |                                      |         | •                   |                        |               | OTHER                           |                        |  |
|                                                                                      |                                                        | (Column 1)                                                                             | and the same of the same of the same of | (Colu                |                               | (Column 3)                           |         | SMALL E             | NTITY                  | OR            | SMALL                           |                        |  |
| AMENDMENT A                                                                          |                                                        | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                              |                                         | NUM<br>PREVI         | HEST<br>IBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA                     |         | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                            | ADDI-<br>TIONAL<br>FEE |  |
|                                                                                      | Total                                                  | *                                                                                      | Minus                                   | **                   |                               | =                                    |         | X\$ 9=              |                        | OR            | X\$18=                          |                        |  |
|                                                                                      | Independent                                            | *                                                                                      | Minus                                   | ***                  | T OL A 114                    | =                                    |         | X40=                |                        | OR            | X80=                            |                        |  |
|                                                                                      | FIRST PRESE                                            | NTATION OF M                                                                           | OLTIPLE DEF                             | PENDEN               | CLAIM                         |                                      | } [     | +135=               |                        | OR            | +270=                           |                        |  |
| egik saggegister, et er opportung i som er en er |                                                        |                                                                                        |                                         |                      |                               |                                      |         | TOTAL               |                        | OR            | TOTAL<br>ADDIT. FEE             |                        |  |
| (***)<br><b>(</b> ***)                                                               | ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) |                                                                                        |                                         |                      |                               |                                      |         |                     |                        |               |                                 |                        |  |
| ENT B                                                                                |                                                        | CLAIMS REMAINING AFTER AMENDMENT                                                       |                                         | HIGI<br>NUN<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA                     |         | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                            | ADDI-<br>TIONAL<br>FEE |  |
| <b>AMENDMENT</b>                                                                     | Total                                                  | kar tugʻing .                                                                          | Minus                                   | **                   |                               | =                                    | ] [     | X\$ 9=              |                        | OR            | X\$18=                          |                        |  |
| \ME!                                                                                 | Independent                                            | •                                                                                      | Minus                                   | ***                  |                               | =                                    | ] [     | X40=                |                        | OR            | X80=                            |                        |  |
| L                                                                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM         |                                                                                        |                                         |                      |                               |                                      | J ∤     | .105                |                        | l             | +270=                           |                        |  |
|                                                                                      |                                                        |                                                                                        |                                         |                      |                               |                                      | L       | +135=               |                        | OR            | TOTAL                           | <u> </u>               |  |
|                                                                                      |                                                        |                                                                                        |                                         |                      |                               |                                      |         | TOTAL<br>ADDIT. FEE |                        | OR            | ADDIT. FEE                      |                        |  |
|                                                                                      |                                                        | (Column 1)                                                                             |                                         |                      | ımn 2)                        | (Column 3)                           |         |                     |                        |               |                                 |                        |  |
| AMENDMENT C                                                                          |                                                        | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                              |                                         | NUN<br>PREV          | HEST<br>MBER<br>IOUSLY<br>FOR | PRESENT<br>EXTRA                     |         | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                            | ADDI-<br>TIONAL<br>FEE |  |
| NOM                                                                                  | Total                                                  | *                                                                                      | Minus                                   | **                   |                               | =                                    |         | X\$ 9=              |                        | OR            | X\$18=                          |                        |  |
| AME                                                                                  | Independent                                            | *                                                                                      | Minus                                   | ***                  |                               | =                                    | <u></u> | X40=                |                        | OR            | X80=                            |                        |  |
| Ľ                                                                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT               |                                                                                        |                                         |                      |                               |                                      | ┧┟      | 405                 |                        |               | .070                            | 1                      |  |
|                                                                                      | If the entry in colu                                   | ımn 1 is less than t                                                                   | he entry in colu                        | ımn 2 wri            | te "0" in co                  | lumn 3                               | L       | +135=               |                        | OR            | +270=                           |                        |  |
| ••                                                                                   | If the "Highest Nu<br>If the "Highest Nu               | Imber Previously P<br>Imber Previously P<br>Imber Previously Pa<br>Inber Previously Pa | aid For" IN THI<br>Paid For" IN TH      | IS SPACE<br>IS SPACE | is less that<br>is less tha   | an 20, enter "20<br>an 3, enter "3." | ,       | TOTAL ADDIT. FEE    | propriate bo           | OR<br>x in co | TOTAL<br>ADDIT. FEE<br>olumn 1. |                        |  |